Application Data Sheet

Given Name::

Application Information	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	Paper
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	TOOL HOLDER UNIT FOR BENDING
	BRAKES
Attorney Docket Number::	FERRARI3
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	6
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	ITALY
Status::	Full Capacity

Fabrizio

Middle Name::	
Family Name::	FERRARI
Name Suffix::	
City of Residence::	TRAVERSETOLO
State or Province of Residence::	PARMA
Country of Residence::	ITALY
Street of Mailing Address::	16 Via Case Rotte
City of Mailing Address::	TRAVERSETOLO
State or Province of Mailing Address::	PARMA
Country of Mailing Address::	ITALY
Postal or Zip Code of Mailing Address::	I-43029
Applicant Authority Type::	Inventor
Primary Citizenship Country::	ITALY
Status::	Full Capacity
Given Name::	Claudio
Middle Name::	
Family Name::	MATTIOLI
Name Suffix::	
City of Residence::	BASILICANOVA
State or Province of Residence::	PARMA
Country of Residence::	ITALY
Street of Mailing Address::	33 Via Argini Sud
City of Mailing Address::	BASILICANOVA
State or Province of Mailing Address::	PARMA
Country of Mailing Address::	ITALY
Postal or Zip Code of Mailing Address::	I-43030
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	

Name Suffix::

City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	
State or Province of Mailing Address::	
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Family Name::	
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Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer Number::

001444

Representative Information

Representative Customer Number::

001444

Domestic Priority Information

Application::

Continuity Type::

Parent Application::

Parent Filing

Date::

Foreign Priority Information

Country::

Application Number::

Filing Date::

Priority Claimed::

ITALY

RE2003A000101

10-20-03

Yes

Assignment Information

Assignee Name::

FERRARI COSTRUZIONI MECCANICHE

S.R.L.

Street of Mailing Address::

11, Via E. Calzetti

City of Mailing Address::

BASILICANOVA

State or Province of Mailing Address::

PARMA

Country of Mailing Address::

ITALY

Postal or Zip Code of Mailing Address::

I-43030